

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		10-10-00
O.I.P.E. CLASSIFIER		12	10/19/00
FORMALITY REVIEW	2A	5C 587	11/06/00
RESPONSE FORMALITY REVIEW	MT	023	04/19/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	11-11-00
1	9-25-00
2	9-02-00
3	✓
4	✓
5	✓
6	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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